

Henry Sherman Annacost
Town County

Died at Hanfford Carroll MARYLAND

Date 1902	Month	Day	Y.	M.	D.	Native of	Occupation
1902	May	14	31	7	17	Md.	Farmer
Male		White	Married		<u>Widow</u>	<u>Divorced</u>	
<u>Female</u>		<u>Colored</u>	<u>Single</u>		<u>Widower</u>	Number of children living	2

Husband of Henry B. Brush
W. Father's Name
Mother's Name

Cause of Death	Primary	Rheumatism	How long sick
Immediate	Consumption	9 mos.	Accident, Suicide, Homicide

Reported by Edgar F. M. Brush M.D.
Address 2 Hanfford - Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Harris Edgar Bamford

Town Mullers County Carroll MARYLAND

Died at Mullers Date 1907 Month May Day 21 Age 36 Native of Pa Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of

Wife

Father's Name

Harris C Bamford Mother's Name Mary E. Lawson

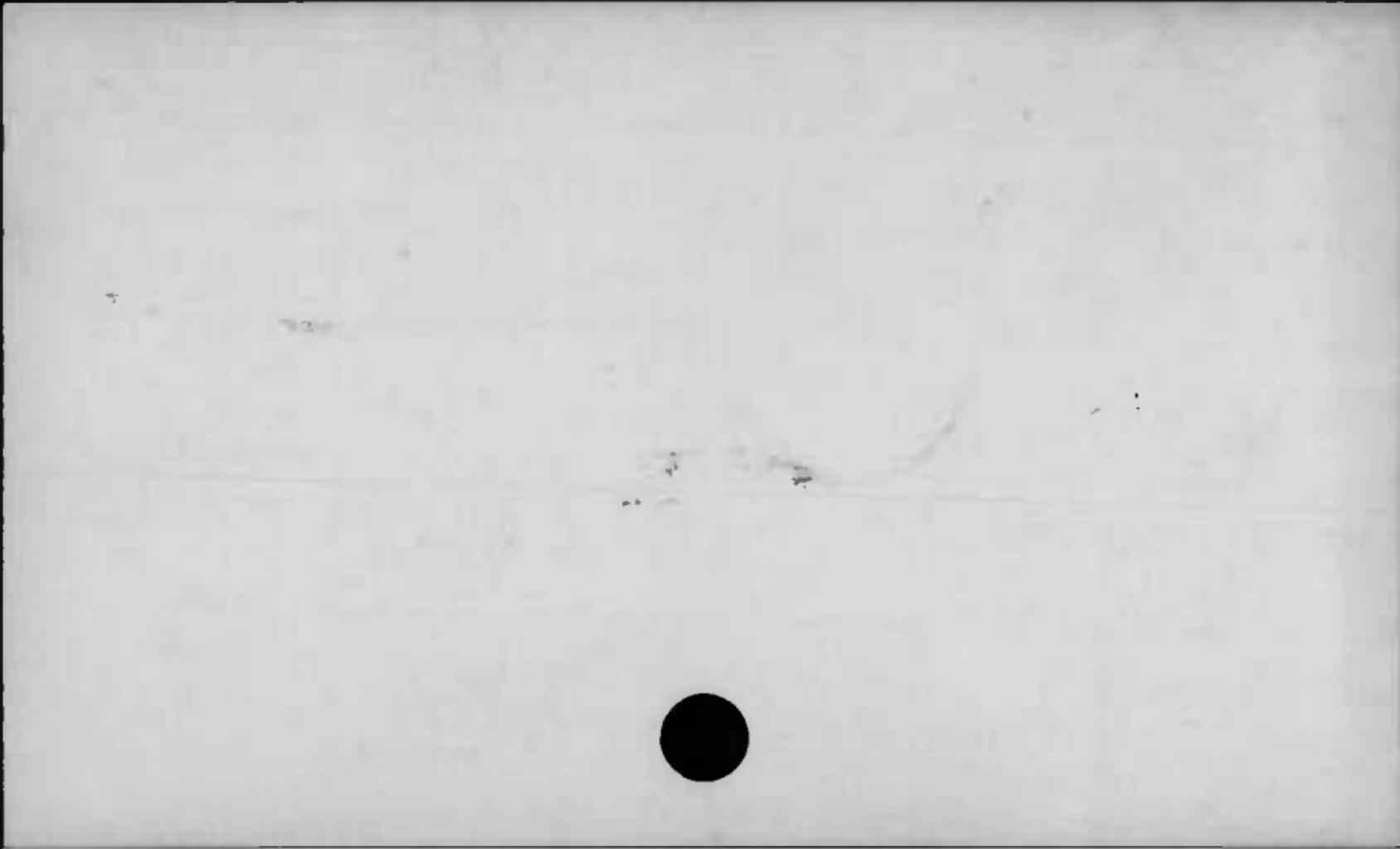
Cause of Death Primary Tubercular Cervico Spinal Meningitis How long sick 2 weeks

Death Immediate Accident, Suicide, Homicide

Reported by

J H Steiman & Son Undertakers
Carroll Co Ind.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Howard H. Bitzel

Town

County

MARYLAND

Died at near smallwood carroll

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	May	13	Age	4.	6.	9	nd
Male	White		Married			Widow	Divorced
Female	Scolored		Single			Widower	Number of children living

Husband of

Wife

Father's Name

Charles H. Bitzel

Mother's
Maiden Name

Elizabeth Crooks.

Cause of

Primary

Scald

How long sick

16

Death

Immediate

Accident, Suicide, Homicide

Reported by

J. T. Sternig MD

Address

9 Westminster

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Leonard Creek
Bunya Gowl
Macalister

Cosana Hoffman Buckingham,
 Town Day County Carroll MARYLAND

Died at

Date 1902
Male

Month Day

Y. M. D.

Native of

Age 40-9-7

Md

Occupation

Female

White

Married

Widow

Divorced

Colored

Single

Widower

Number of children living

Husband of

Wife

Chas. Buckingham

Father's

Name

J. H. McQuay

Mother's

Name

Lucina McQuay

Cause of

Primary

Abortion

(35)

How long sick

17 days

Death

Immediate

Puerperal Fever

Accident, Suicide, Homicide

Reported by

E. D. Cook

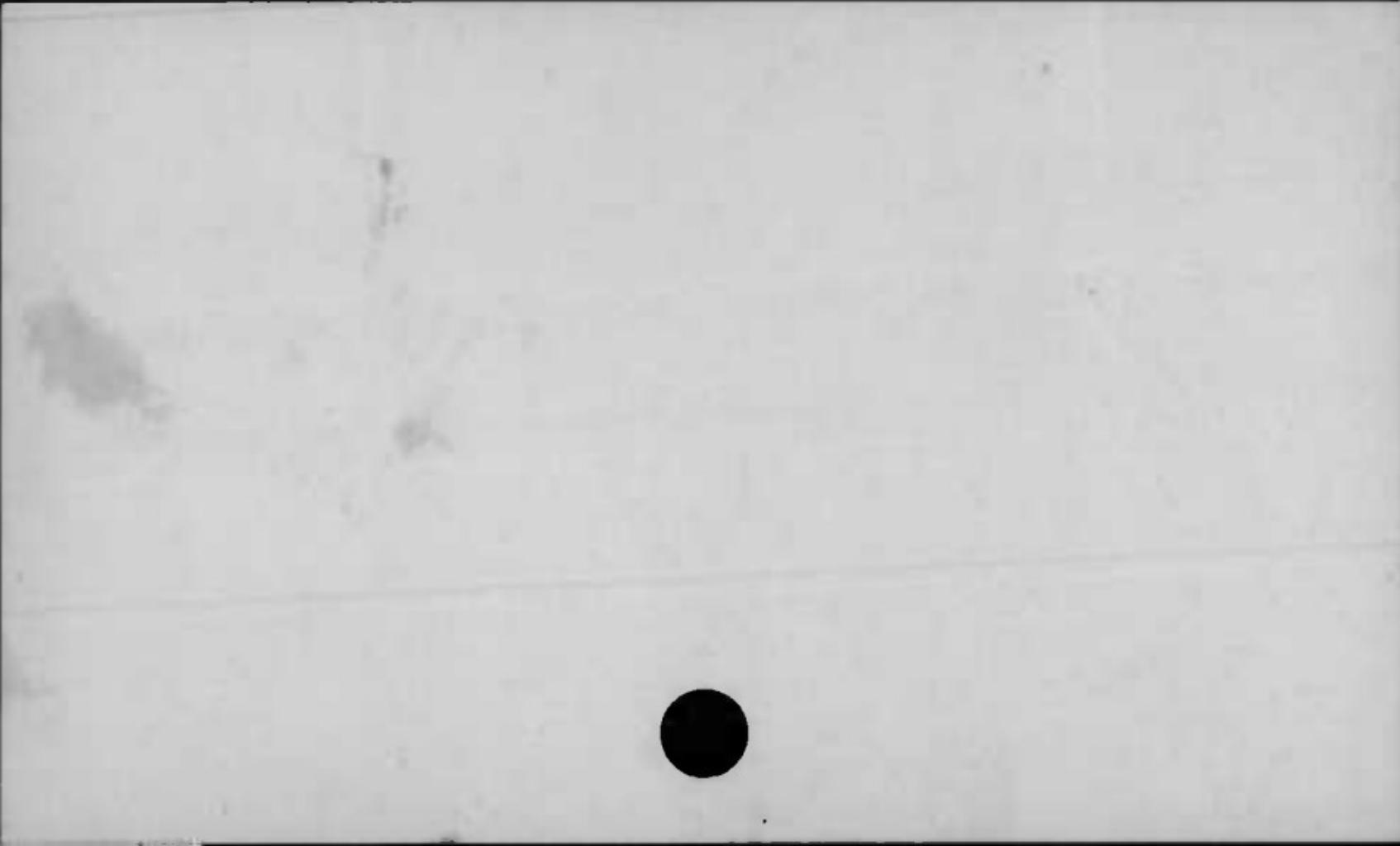
M.D.

Address

Winfield

Carroll Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Mary Ann Burns,

Town

County

Died at

Manchester

Carroll

MARYLAND

Date 1902

Month Day

Y.

M.

D.

Native of

Occupation

May 14

Age 83.

6. 27

America

House work

Male

White

-Married

Widow

Divorced

Female

Colored

-Single

Widower

Number of children living

Nine

Husband

of

David Burns,

154

Wife

Father's

Name

Joseph Brummond

Mother's

Aiden Name

Elizabeth Frobble

Cause of

Primary

Health Troubles

How long sick

4 Years or more

Death

Immidiate

General debility

Accident, Suicide, Homicide

Reported by

Dr. F. B. Nease, M.D.

Address

Manchester

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Died at

Town

County

Cordelia Briewell
List Carroll

MARYLAND

Date 1902

Month Day

Y. M. D

Native of

Occupation

White

Age 64-11-6

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

4

Husband of

Wife

Father's

Name

James V. Briewell,

Mother's

Reuben Conway Name Susanne Conway

Cause of

Primary

Atherosclerosis

How long sick

2 yrs.

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

J. P. Walt & Son W. and E.

Address

Winfield Carroll Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



<i>Infant</i>			County	<i>Carroll</i>			MARYLAND
Died at	Town	Month	Day	Y.	M.	D.	Native of
Date 19	<i>02</i>	<i>May</i>	<i>6</i>	Age			Occupation
Male	White	Married	Widow				Divorced
Female	Colored	Single	Widower				Number of children living
Husband of							
Wife							
Father's Name	<i>Wm C Devildies</i>			Mother's Maiden Name	<i>Rosa M. Omeloff</i>		
Cause of Death	Primary	<i>She Born</i>			How long sick		
	Immediate				.		
Reported by	<i>Jos. J. Harrington MD</i>						
Address	<i>Ward ma</i>						

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

1



Walter A Dutton

Town

County

Died at

Silver Run

MARYLAND

Date 18902

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Age -

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's Name

Alvin G Dutton

Mother's Maiden Name

Ada A Bosworth

Cause of Death

Primary

How long sick

Death

Immediate

Convulsions

Two Days

Accident, Suicide, Homicide

Reported by

Dwight Stewart

Address

Union Mills

Ind

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

George Eckeroode ✓

Town

County

Died at Westminster Carroll

MARYLAND

Date 1902	Month May	Day 16	Y. Age	M.	D.	Native of Md	Occupation Blacksmith
Male	White		Married	Widow		Divorced	
Female	Black		Single	Widower		Number of children living	6

Husband of

Wife

Father's Name

Guigling

Mother's

Eckeroode

Maiden Name

40

Cause of

Primary

How long sick

1 year

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Catholic Church -

Name in Full

Certificate of Death

Angusta Lelka

Died at	Town	County			
Springfield State Hospital-Sykesville.			MARYLAND		
Date 19	Month	Day	Y.	M.	D.
02.	-	5	-	3	-
Male	White	Married	Widow	Native of	
Female	Coloured	Single	Widower	Occupation	
			Germany Housewife.		
			Number of children living 2.		

~~Husband~~ of

Wife

Father's

Name

Cause of

Primary

Paralysis.

Death

Immediate

Louise Paralytic Stroke exhaustion following

Accident, Suicide, Homicide

Reported by

illness-1 week.

-ing

Address

Springfield State Hospital-Sykesville-Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



230 Jacob Gettigner

Town

County

Died at Sandyville Carroll

MARYLAND

Date Died 1802 Month May Day

Y. M. D.

Native of

Occupation

Male

White

Age 80
Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

2

Husband of

Mary Tanner

Father's Name

Jruth Gettigner

Mother's Name

Sarah Parley

Cause of Death

Primary

Immediate

How long sick

12 weeks

Accident Suicide Homicide

Reported by

M'L Bott

Address

Westminster Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Hepner, Margaret - A.

Town County
Syrupsville, Barrois MARYLAND

Died at

Date 1902

Month Day

Y. M. D.

Native of

Occupation

Date 1902

Male

White

Married

Widow

Widow

Homemaker

Female

Coloured

Single

Widower

Number of children living

5

Husband of

Wife

Asa Hepner

Father's

Name

Lewis Warfield

Mother's

Name

Vettie Warfield

Cause of

Primary

Diabetes Mellitus

50

How long sick

6 mos

Death

Immediata

Heart Failure

Accident, Suicide, Homicide

Reported by

Frank Lucas, M.D.

Address

Syrupsville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Uriah Franklin, Humbert 55

Town County
Died at Middleburg Carroll MARYLAND

Date 1902	Month 5	Day 26	Y. 26	M. 6	D. 2	Native of Carroll Co	Occupation Farmer
Male	White	Married	Widow	Divorced			
Female	Colored	Single	Widower			Number of children living	one

Husband of Wife Maggie M. Humbert.

Father's Name Fred C. Humbert Mother's Maiden Name Martha E. Yingling

Cause of Death	Primary Epilepsy	How long sick 8 yrs
	Immediate Suffocation	Accident, Suicide, Homicide

Reported by H. Lumbin Brown M.D.

Address 7 Union Bridge

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Abigail Koontz

Town

County

Died at

MARYLAND

Silver Run Castle

Date 19

Month

Day

Y.

M.

D.

Native of

Occupation

02

5/12

Age

73

Widow

Divorced

Farmer

Male

White

Married

Female

Colored

Single

Widower

Number of children living

4

Husband
of~~Wife~~Father's
NameMother's
Maiden NameSavannah Koontz
Abraham Koontz Hartnah Lb.

Cause of

Primary

How long sick

6 months

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Paralysis

Father's birthplace Silver Run, Ind.

Mother's birthplace Silver Run, Ind.

23
2 Mary. Au. Little

Died at County Town Carroll MARYLAND

Died at	County	MARYLAND
Date 1902	Month	Day
	May	14
Male	Age	101-1-4
Female	Married	Widow
Husband of	Colored	Divorced
Wife	Single	Number of children living
Father's Name	Mother's Maiden Name	None

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Bart's meeting House

Name in Full

Certificate of Death

James T. Mc Clure Jr.

Town

County

Died at

Eldersburg.

Carroll

MARYLAND

Date 1902	Month May	Day 18	Y. 61	M. 4	D. 6	Native of Md.	Occupation Carpenter
Male	White		Age	Married			
						Number of children living	5

Husband
of

Amanda R. Mc Clure

Father's
Name

John L. Mc Clure Mother's Name Tonie Stuhhoff

Cause of

Primary Cancer of liver

How long sick

6 mos.

Death

Immediate

asthenia

Accident Suicide Homicide

Reported by

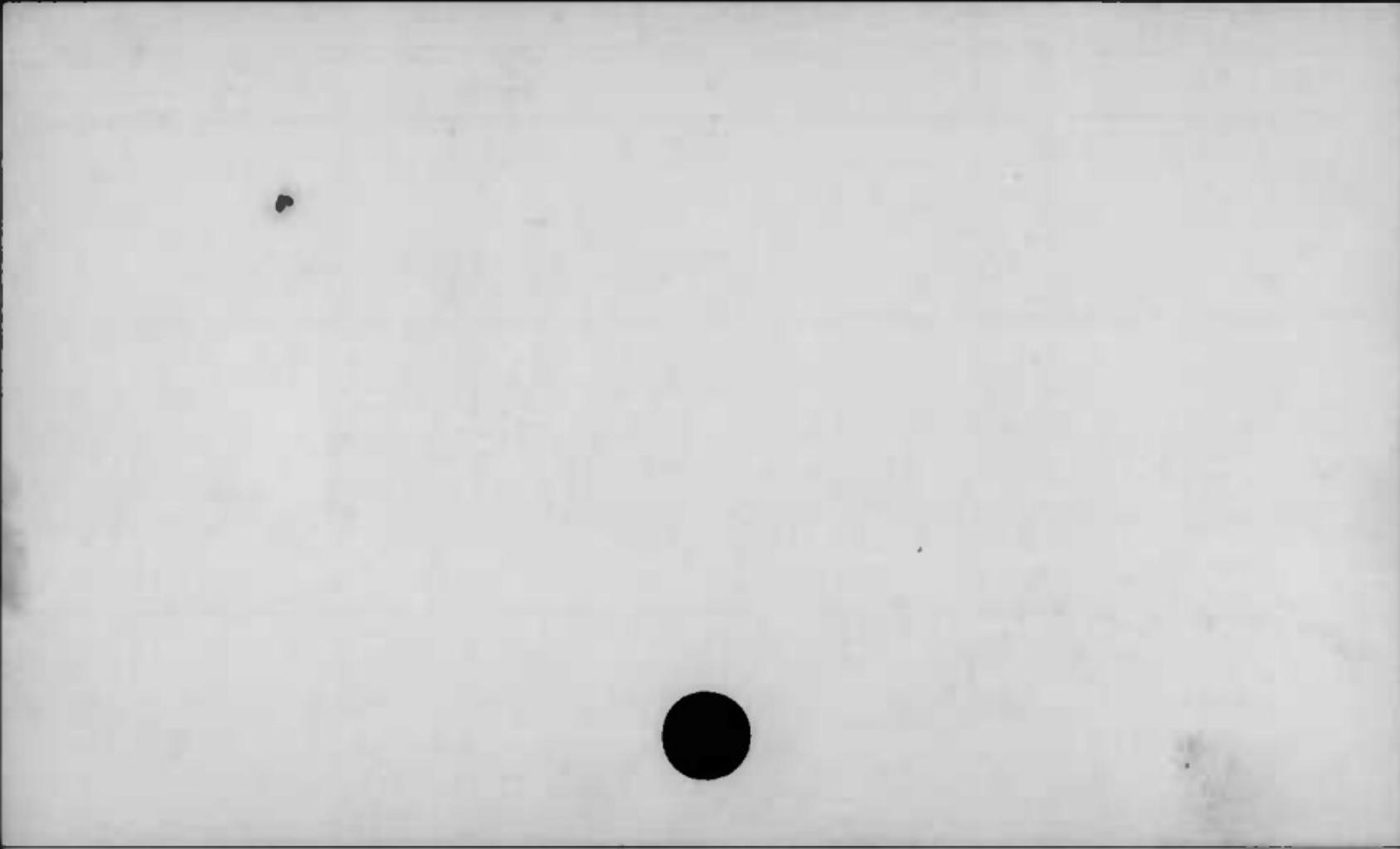
Mt Morris. Md.

Address

J

Eldersburg. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

George P'willer

Town
Miller

County

Carroll

MARYLAND

Died at

1907

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1907

May 26

Age

70.11.19

Pennsylva

Farmer

Male

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Widower

Number of children living

Husband
of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

Reported by

Address

How long sick

2 months

Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79705

Attended by Dr.

J. H. Weston
of Manchester

Seen by Coroner

of

Information contained in this certificate re-
ceived from

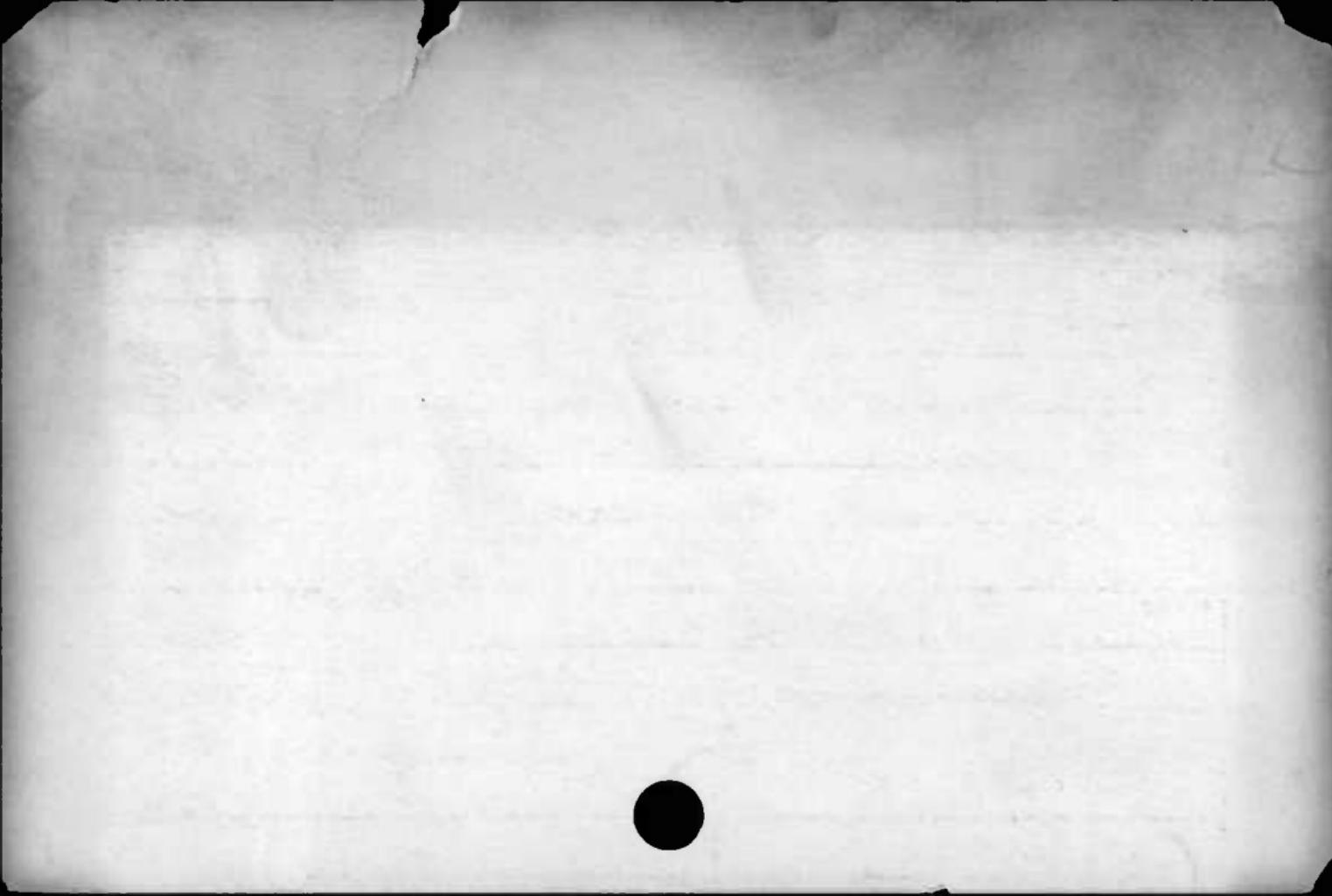
John Miller
of Milcars

TO BE ANSWERED BY
NEAREST FRIENDPHYSICIAN
OR CORONER

32							CERTIFICATE OF DEATH		
Died at		Town			County	MARYLAND			
Date of death	190	Month	Day	Years	Months	Days			
Sex	Female	Color or Race	Age	63					
Married, Single or Widowed		Occupation	Montgomery Md						
Name of Wife or Husband	Jacob Myerly								
Father's Name	Henry Herbleigh								
Mother's Maiden Name	Eleanor Wright 170								
Name of person giving Information	Emma Duncan Sister								

CAUSES OF DEATH

Primary	Bright's Disease	How long	Several Years
Immediate	Heart Failure & Drop	How long	2 months
Are the name, age, sex, color, date and place correctly given above?	Signature of Physician Address		
<i>J.</i>	<i>Jas. H. Billingsall M.D.</i> <i>Westminster Md.</i>		
Accident or Suicide?			



Town <u>Kingsville</u>			County <u>Carroll</u>			MARYLAND	
Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Date <u>1902</u>	<u>5</u>	<u>7</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
Male	White	Age <u>—</u>	Married	Widow	Divorced		
Female	Colored	Single	Widower	Number of children living <u>8</u>			
Husband of							
Wife							
Father's Name	<u>Oliver Newcomer</u>			Mother's Name	<u>Alma B Newcomer</u>		
Cause of Death	Primary	<u>Still-Born</u>			How long sick <u>—</u>		
	Immediate				Accident, Suicide, Homicide <u>—</u>		

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Mary Rusbauer

57

Town

County

Died at

Near Union Bridge

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

5 27

Age 64

2100

Laborer.

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

5

Husband of

Wife

Father's

Mother's

Name

Maiden Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Dr J Watt

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



231*Elizabeth**Parris*

Town

County

MARYLAND

Died at

Date 400 1902 May 9

Month Day

Y. M. D.

Native of

Occupation

Male

White

Age 64 -

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

6

Husband of

Wife

Father's

Name

Mother's

Name

79

Cause of Primary *Mental insufficiency* How long sickDeath Immediate *Heart trouble* Accident, Suicide, HomicideReported by *F. J. N. Welch*Address *number 1*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

<u>238</u>		<u>Jacobe Petry</u>			
Died <u>near Westminster</u>	Town	County	<u>Cognall</u>	<u>19</u>	MARYLAND
<u>1902</u>	Month	Day	<u>76</u>	<u>5 29</u>	Occupation
Date <u>May</u>		<u>31</u>	Age	Native of <u>Pai.</u>	<u>Farmer</u>
Male	White	Married	Widow	Buried	
<u>F</u>	<u>C</u>	<u>S</u>	<u>W</u>		Number of children living <u>8</u>
Husband of <u>Annie L. Petry (Shaffer.)</u>					
Father's Name <u>Michael Petry</u>	Mother's Maiden Name <u>Hout</u>				
Cause of Death { Primary <u>Fatty Degeneration of Heart</u>	How long sick <u>one year</u>				
Death Immediate	Accident Suicide Homicide <u>" "</u>				
Reported by <u>Penis K. Woodward</u>					
Address <u>Westminster</u>	<u> Maryland</u>				

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



John Reinhardt
 Town Springfield State-Hospital County Carroll Co. MARYLAND

Died at

1902
Date 109Month Day
5 27

Age 48

Y.

M.

D.

Native of Germany

Occupation Laborer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Hydrocephrosis

How long sick

Death

Immediate

asthenia

Accident, Suicide, Homicide

Reported by

Chas J. Carey M.D.

Address

of Sykesville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Annie May Rodenbush

Died at Springfield State Hosp., Carroll Co., MARYLAND
 Town County
 Month Day Y. M. D. Native of Occupation
 Date 19 02 May 17 24 Baltimore none

~~Husband~~ White Widower Divorced
 Female Colored Single Widower Number of children living

Husband of

Wife

Father's Name

Mother's Maiden Name

Unknown Unknown

Bright's Disease

Primary Post-epileptic dementia + 4 days

Death Immediate Exhaustion after repeated

Accident, Suicide, Homicide

Reported by Dr. A. Hayes M.D. Commissions

Address Springfield State Hospital

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

John Ruby

Town

County

MARYLAND

Died at

Sykesburg Carroll

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

Male

Age

Married

Widow

Divorced

Female

White

Coloured

Single

Widower

Number of children living

5-

Husband of

Wife

Father's

Name

Mother's

Maiden Name

154

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



TO BE ANSWERED BY
NEAREST FRIEND

23

Francis W. Sanford

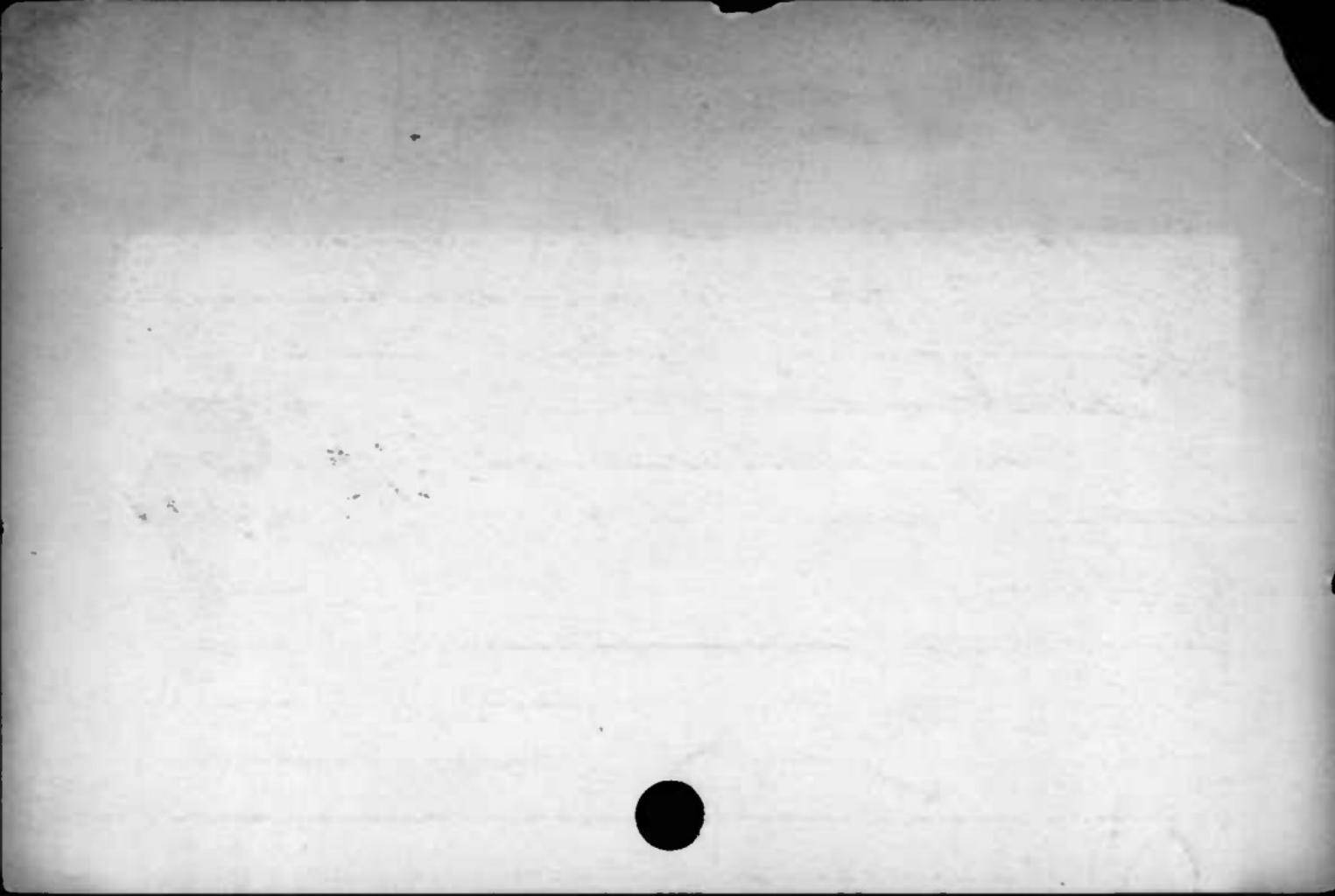
CERTIFICATE OF DEATH

Died at		Westminster	County	Carroll		
Date of death	Month	Day	Age	Years	Months	Days
1902	May	27 th	61		3	-
Sex	Male	Color or Race	white	Birth-place		
Married, Single or Widowed	Single		Occupation			
Name of Wife or Husband						
Father's Name	Abraham Sanford			Father's Birthplace	Schenectady	
Mother's Maiden Name	Annie Wagner			Mother's Birthplace	bed	
Name of person giving Information	Louisa Serrin			How related to deceased	Niece	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Concussion of Brain	How long	36 hr
Immediate		How long	" "
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician	Jos. J. Herring M.D.
		Address	Westminster
Accident or Suicide?			



Katherine Suiz -

Died at Springfield State Hospital Carroll Co. MARYLAND
 Town County

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1902	May	21	Age	78		Germany	Seamstress
Mate	W.Mite	Married		Widow	Divorced		
Female	Colored	Single		Widower		Number of children living	/

Husband of George Bilk

Wife Father's Name George Bilk Mother's Maiden Name

Cause of Death Primary Senile dementia, Bright's How long sick

Death Immediate Brain effusion 4 days

Reported by Dr. A. Matris M.D.

Address Springfield State Hospital.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Died at

Town

County

Taneytown.

Shoemaker
Coroner

MARYLAND

Date

Month Day

Y. M. D.

Native of

Occupation

1902.

5. 13

72 - 9 /

Housewife

Age

Widow

Divorce

Female

White

Married

Number of children living

11.

Husband of

Wife

Father's

Name

Cause of

Primary

Mother's

Name

Death

Immediate

Cerebral Hemorrhage

How long sick

1 year

Reported by

Heart Failure

Accident, Suicide, Homicide

C. W. Weaver

Address

Taneytown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

225 Caroline Haines Shriver

Town

County

Died at

Westminster

D.

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

1902

May

121

Year

Age 69-8-24

Married

Widow

Widower

Divorced

Female

Colored

Single

Number of children living

9

Husband of

Augustus Shriver

Wife

Father's

Name

Mother's

Maiden Name

Katharine Sillman

Hawthorne

Cause of

Primary

Paroxysm

64

Gavot two

Death

Immediate

Clot on brain

Accident, Suicide, Homicide

Reported by

Jas. H. Billingsley M.D.

Address

Westminster

Md -

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Died at

Town

County

MARYLAND

Squirrel Carroll

Month

Day

Y.

M.

D.

Native of

1904

4

Occupation

Date +89

2

Wife

Colored

Age

Married

Widow

Divorced

Female

Single

Widower

Number of children living

Husband
of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

How long sick

Reported by

Accident, Suicide, Homicide

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Andrew Stoubtz
 Town Hamilton County Carroll

MARYLAND

Died at

Date 1902

Month May Day 12

Y. 75 M. 6 D. 16

Native of

Occupation Farmer

Male

White

Age 75 Married

Widow

Divorced

F.

S.

S.

Widower

Number of children living

8

Husband of

Wife

Father's

Name

Cause of

Primary

Mother's

Name

Death

Immediate

Mary Stoubtz
 Nephritis 120

How long sick
 Death occurred
 and 2 wks

Accident, Suicide, Homicide

Reported by

Address

C. H. Steffens, M.D.
 Sykesville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Died in Horrard County

Died at

Town

Newfaneville

County

Carroll

MARYLAND

Date 19 02

Month

Day

Y

M.

D.

Native of

Occupation

 Male White Female

Colored

Age
Married

Single

 Widow

Willower

 Deceased

Number of children living

Husband of

Wife

Father's

Name

Cause of

Primary

Death

Immediate

Mother's

Maiden Name

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Gertie Younger

58

Town

County

Died at

Union Bridge

Carroll

MARYLAND

Month Day

Y. M. D.

Native of

Date 19 2

5 25

Age 28

MD

Occupation

House wife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

2

Husband

of

Wife

Warren Younger

Father's

Mother's

Name

John Stevens

Maiden Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

179

Dr. J. Watt

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

